

## Sampling Station Identification Form

Form completed by		Daytin	ne phone number	Volunteer monitoring g	roup name	
		(	) -			
Sample type (circle one)	Station ID (to be filled in	by NHDES)	Station name (100 ch	racters max)		
VLAP VRAP Complaint						
Town (not village name) st	ation is in State	c (circle one)  ME Canada	Date station established	Total water depth at station		
	MA	VT	//	_	in ft cm m	
Station type (circle one)						
Catch Basin Channelized Stream Constructed Wetland Culvert Drain Manhole	•		Wetland - Estuarine, forested* Wetland - Palustrine, moss-lichen* Wetland - Estuarine, scrub-shrub* Wetland - Palustrine, scrub - shrub*			
*Estuarine = Estuary, Lacustrine = Lake, Palustrine = Wet or Marsh area, River					e = Wet or Marsh area, Riverine = River	
If Station type = Well, pl	ease fill in the follo	wing:				
Well is used for (circle of Extraction Monitoring Recharge/Injection	ne):	Water is used for (circle one): Domestic Irrigation Commercial Industrial		Type of well Bedrock Overburden Unknown	Overburden	
Station description:						
Directions to station:						
Date Located:// Please attach a map showing the location of the sampling station.						
If located by GPS: Latitude (Format ex: 42)	5678) Longitud	2	Datum (circle NAD 1927 NA Other:	D 1983 WGS 1984		
Elevation information (red Elevation	quired only for VRAF  Units (circle one)  ft m	→ Method	(circle one) p		one or enter) NAVD 1988 WGS	

VLAP  $\underline{\text{or}}$  VRAP Program (Please specify a program.) NHDES Send form and map to:

P.O. Box 95

Concord, NH 03302-0095